

APPLICATION NO.	CONT/PRIOR	CLASS	SUBCLASS	ART UNIT	EXAMINER
09/779086	D	514	008 000	1627	Celsa

parent

PTO-2040
12/99[illegible]

<div style="border: 1px solid black; width: 30px; height: 30px; display: flex; align-items: center; justify-content: center;"> <div style="width: 10px; height: 10px; background-color: black;"></div> </div> TERMINAL DISCLAIMER	DRAWINGS			CLAIMS ALLOWED	
	Sheet Draw.	Figs. Draw.	Print Fig.	Total Claims	Print Claim for O.G.
To be filled in by the applicant to be _____ (date) by the drawing office	_____ (Number of Drawings)			_____ (Number of Claims)	
To be filled in by the applicant to be _____ by the drawing office	_____			_____	